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Sexually Transmitted Infections in Adolescents – A Problem to be Solved

Rosa Amorim-Figueiredo*

Department of Pediatrics, Dona Estefania Hospital, Sao Jose Local Health Unit, Lisbon, Portugal

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***Corresponding author:** Rosa Amorim-Figueiredo, Department of Pediatrics, Dona Estefania Hospital, Sao Jose Local Health Unit, Rua Jacinta Marto 8A, 1169-045 Lisboa, Portugal, E-mail: rosa.a.figueiredo@sapo.pt

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ABSTRACT

Adolescents are a risk-population for Sexually Transmitted Infections (STIs) since their brain has not yet reached full maturity. It is important to be aware of this problem in order to find solutions to prevent STIs in adolescence.

Keywords: Adolescents, Sexually transmitted infections, Sexual intercourse, Chlamydia trachomatis, Neisseria gonorrhoeae

Abbreviations: HIV: Human Immunodeficiency Virus; HPV: Human Papillomavirus; STIs: Sexually Transmitted Infections; USA: United States of America

1. Editorial

The brain matures until the age of 24 years¹⁻³, with young people (15-24 years-old) being known for risk-taking and unawareness of the future consequences⁴⁻⁶. That is why this age is particularly vulnerable to Sexually Transmitted Infections (STIs)⁷.

Chlamydia trachomatis and Neisseria gonorrhoeae are the most common bacterial infections in young people, with varying incidence over the years⁸. Human Papillomavirus (HPV) is the most common viral infection in young people, with its prevalence being difficult to access⁹. Chlamydia trachomatis is more common in females, while Neisseria gonorrhoeae is more common in males, according to the last statistical reports of United States of America (USA)⁸ and Europe^{10,11}.

In the USA⁸ and Europe¹⁰⁻¹², young people account for 50% to 60% of the new cases of Chlamydia trachomatis infections, 30% to 40% of new cases of Neisseria gonorrhoeae, and 10% to

20% of the new cases of syphilis. Young people also account for 10% to 20% of the new Human Immunodeficiency Virus (HIV) cases in the USA¹³, and 5% to 10% in Europe¹⁴.

Efforts have been made in the last decades to reduce the incidence of STIs. Behavioral interventions raising awareness of STIs and the importance of using condom during sexual intercourse have been tried throughout the years^{15,16}. Pre-Exposure Prophylaxis is also a way to reduce HIV spread^{17,18}.

Previous studies show that sexual debut is happening earlier than in the past¹⁹.

Adolescents are not probably aware of the risks of sexual intercourse. This can be worrying, and we must try to understand why this is happening. Is this a failure of our health care systems, which are not advising adolescents to STIs prevention? Are the parents and schools failing in their education? Are the social media doing everything they can to make adolescents aware of this problem?

Several studies have shown that adolescents are a risk-population for STIs⁴⁻⁶. The many interventions tried in our society^{15,16} seem not to be enough to stop the increase in the main STIs affecting young people^{8,20}.

The fact that sexual debut is occurring earlier than in the past constitutes a risk for an increase of the incidence of STIs at a lower age. We should be acting before these adolescents had their first unprotected intercourse. For that, it would be important that there was a universal medical appointment to adolescents, where they would go at least every 3 months, to address questions related to sexuality. This appointment could be made in school by a primary or secondary care physician. If all of the adolescents had this regular appointment, they would not probably feel discriminated because not only the adolescents at risk of STIs would go to this appointment, but all adolescents would.

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